

WINDOW ROCK FLEET MANAGEMENT SERVICE CENTER
PO Box 608 * Window Rock, Arizona 86515
(928) 871-6427 or 6428

VEHICLE RETURN INSPECTION FORM

Date of Inspection: Inspected By: Title:

Vehicle No: Year: Make: Model: Engine:

Department: Mileage: VIN No:

COMPONENTS	OPER	NON	GOOD	FAIR	BAD	REMARKS
1 ENGINE						
2 BATTERY						
3 IGNITION SYSTEM						
4 FUEL SYSTEM						
5 COOLING SYSTEM						
6 AIR CONDITIONING						
7 EXHAUST SYSTEM						
8 INTERIOR CONDITION						
9 SEATS / CUSHIONS						
10 FLOOR CARPET / MAT						
11 INSTRUMENT PANEL						
12 BRAKES						
13 STEERING SYSTEM						
14 SHOCKS / STRUTS						
15 COIL / LEAF SPRINGS						
16 TRANSMISSION						
17 TRANSFER CASE - 4WD						
18 FRONT AXLE - 4WD						
19 REAR AXLE						
20 BODY CONDITION						
21 VEHICLE FRAME						
22 LIGHTING SYSTEM						
23 WINDSHIELD						
24 GLASS CONDITION						
25 LEFT FRONT TIRE						
26 RIGHT FRONT TIRE						
27 LEFT REAR TIRE						
28 RIGHT REAR TIRE						
29 SPARE TIRE						
30 JACK / WRENCH						
THIS VEHICLE IS:						

REMARKS: _____

Purchased by: Fleet: ☐ Program: ☐ Donation: ☐ Acct No:

DISCLAIMER NOTE: This inspection report and categories are for classification of mechanical operation only and are NOT warranties for purposes of any general or particular use and driving, which shall be the sole responsibility of the purchaser, who accepts the vehicle in its condition "AS IS".